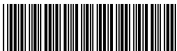


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|-------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------|
| Index of Claims  | Application/Control No. 10527216 | Applicant(s)/Patent Under Reexamination ISHIBASHI, MICHIO |
| | Examiner Jean-Louis, Samira | Art Unit 4173 |

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|---|-----------------|---|-------------------|---|---------------------|---|-----------------|
| ✓ | Rejected | - | Cancelled | N | Non-Elected | A | Appeal |
| = | Allowed | ÷ | Restricted | I | Interference | O | Objected |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | | | | <input type="checkbox"/> CPA | | | | | <input type="checkbox"/> T.D. | | | | | <input type="checkbox"/> R.1.47 | | | | |
|----------------------------------------------------------------------------------------|----------|------------|------------|------------|------------------------------|--|--|--|--|-------------------------------|--|--|--|--|---------------------------------|--|--|--|--|
| CLAIM | | DATE | | | | | | | | | | | | | | | | | |
| Final | Original | 10/09/2007 | 12/07/2007 | 08/31/2008 | | | | | | | | | | | | | | | |
| | 16 | + | ✓ | ✓ | | | | | | | | | | | | | | | |
| | 17 | + | N | N | | | | | | | | | | | | | | | |
| | 21 | + | N | N | | | | | | | | | | | | | | | |
| | 22 | + | N | N | | | | | | | | | | | | | | | |
| | 23 | + | N | N | | | | | | | | | | | | | | | |
| | 24 | + | N | N | | | | | | | | | | | | | | | |
| | 25 | + | N | N | | | | | | | | | | | | | | | |
| | 26 | + | N | N | | | | | | | | | | | | | | | |
| | 27 | + | N | N | | | | | | | | | | | | | | | |
| | 28 | + | N | N | | | | | | | | | | | | | | | |
| | 39 | | | ✓ | | | | | | | | | | | | | | | |
| | 40 | | | ✓ | | | | | | | | | | | | | | | |
| | 41 | | | ✓ | | | | | | | | | | | | | | | |
| | 42 | | | ✓ | | | | | | | | | | | | | | | |
| | 43 | | | ✓ | | | | | | | | | | | | | | | |
| | 44 | | | ✓ | | | | | | | | | | | | | | | |